

Name in Full

Certificate of Death

Columbus Buckmaster

10

Town

County

Died at

MARYLAND

Month

Day

Y.

M.

D.

Native of

Occupation

Date 189

Male

White

Age

Married

~~Widow~~~~Divorced~~

Number of children living

Husband

of

Father's

Name

Mother's

Name

Cause of

Primary

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 65966



Name in Full

Certificate of Death

17

Jannie Jennings Carey

Town

County

Died at

Solomons

Calvert

MARYLAND

Date 189

8 Aug - 21

Month

Day

Y

M.

D.

Native of

Occupation

Age

- 5 3 Calvert Co.

Infant.

~~Male~~

White

~~Married~~~~Widow~~~~Divorced~~~~77~~

Female

~~Colored~~

Single

~~Widower~~

Number of children living

Husband

of

Wife

Father's

Name

Merrill H. Carey

Mother's

Name

Phorbe Elliott

Cause of

Primary

Marasmus 12

How long sick

5 months.

Death

Immediate

Catarrh Inflamm of Intestines

Accident, Suicide, Homicide

Reported by

Dr W. H. Marsh

Address

Solomons Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 85968



Name in Full

Certificate of Death

Elbert Hewitt Cox

19

Town

County

Died at

Lo. Marlboro

Calvert

MARYLAND

Date 189	Month	Day	Age	Y.	M.	D.	Native of	Occupation
8	8	28		8	23		Calvert Co.	
Male	White	Married		Widow			Divorced	
Female	Colored	Single		Widower			Number of children living	

Husband of  
WifeFather's  
Name

Saml. J. Cox Jr.

Mother's  
Name

Sarah Edith Ward.

Cause of

Primary

Cholera Infantum

How long sick

14 days-

Death

Immediate

Cerebral Congestion

~~Accident, Suicide, Homicide~~

Reported by

E. H. Himmans M.D.

Address

Lo. Marlboro

Calvert Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65002



Name in Full:

Certificate of Death

21

Edward Ford Jr

Town

County

Died at

MARYLAND

Date 1898

Month

Day

Y.

M.

D.

Native of

Occupation

Aug 31

Age

2

12

Chamneyville

Male

~~White~~

Married

Widow

~~Divorced~~~~Female~~

Colored

Single

~~Widower~~

Number of children living

Husband

of

Wife

Father's

Name

Edward Ford

Mother's

Name

Maria Contu

Cause of

Primary

Diphtheria.

How long sick

3 days

Death

Immediate

Asphyxia.

Accident, Suicide, Homicide

Reported by

T.M. Chaney M.D.

Address

Dunkirk

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 66968





Name in Full

Certificate of Death

15

Emery S. Glass

Died at <sup>Town</sup> Oliver <sup>County</sup> Baltimore

MARYLAND

Date 189 8 Aug 17 Age 84.7 10 <sup>Y. M. D.</sup> Baltimore <sup>Occupation</sup> Shoe button  
 Male White ~~Married~~ ~~Widow~~ ~~Divorced~~  
~~Female~~ ~~Colored~~ Single Widower Number of children living six

Husband  
of  
WifeFather's Name Thomas GlassMother's  
NameCause of { Primary DysenteryDeath { Immediate ExhaustionHow long sick six months

Accident, Suicide, Homicide

Reported by John S. Dorsey M.D.Address Betha Baltimore Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65868



Name in Full

Certificate of Death

18

Died at

Date 189

Male

~~Female~~

Husband

Wife

Father's

Name

Cause of

Death

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

James Ellsworth Gray

Town

County

Champlain

Calvert

MARYLAND

Month	Day	Y.	M.	D.	Native of	Occupation
Aug	26		2	10	Champlain	

Married	Widow	Divorced
Single	Widower	Number of children living

of

James Gray

Mother's

Name

Susan Taylor

Primary Broncho-Pneumonia

How long sick

8 days

Immediate Asthenia

~~Accident, Suicide, Homicide~~

J. M. Lang M. D.

Dundick

LIBRARY BUREAU, 65968



Name in Full

Certificate of Death

(Bob) Hardisty

11

Town

County

Died at

MARYLAND

Month

Day

Y.

M.

D.

Native of

Occupation

Date 189

8

8

4

Age

8

Carpenter

Male

White

Married

Widow

Divorced

~~Female~~~~Colored~~

Single

Widower

Number of children living

Husband

of

Wife

Father's

Name

Charles Hardisty

Mother's

Name

Fannie Hardisty

Cause of

Primary

Colic,

Death

Immediate

&amp; pneumonia.

How long sick

4 weeks.

Accident, Suicide, Homicide

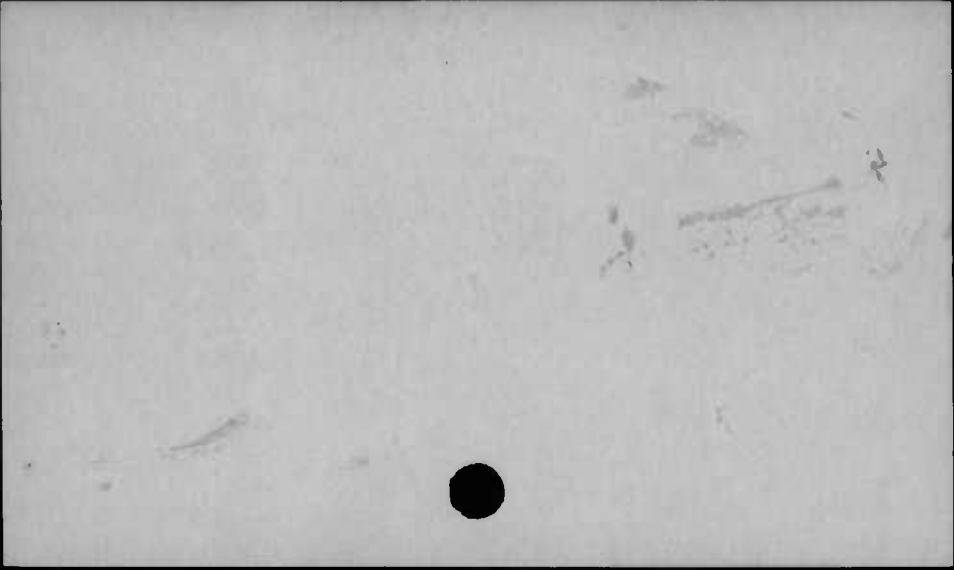
Reported by

Address

Philip Brannen  
Mutual Calvert Co Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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20

Name in Full

Mrs Mack Hornum

Town

County

MARYLAND

Died at

Bromie Island Calvert

Date 189

Month

Day

Y.

M.

D.

Native of

Occupation

8

8 29

Age

abt- 35

Md

Housewife

~~Male~~

White

Married

~~Widow~~~~Divorced~~

Female

~~Colored~~~~Single~~~~Widower~~

Number of children living

5

Husband

of

Mack Hornum

Father's

Mother's

Name

Name

Jno Young

Mary Young

Cause of

Primary

How long sick

Supposed to be some kind of stroke / 1 hr

Death

Immediate

Syncope

157

Accident, Suicide, Homicide

Reported by

Philip Moore

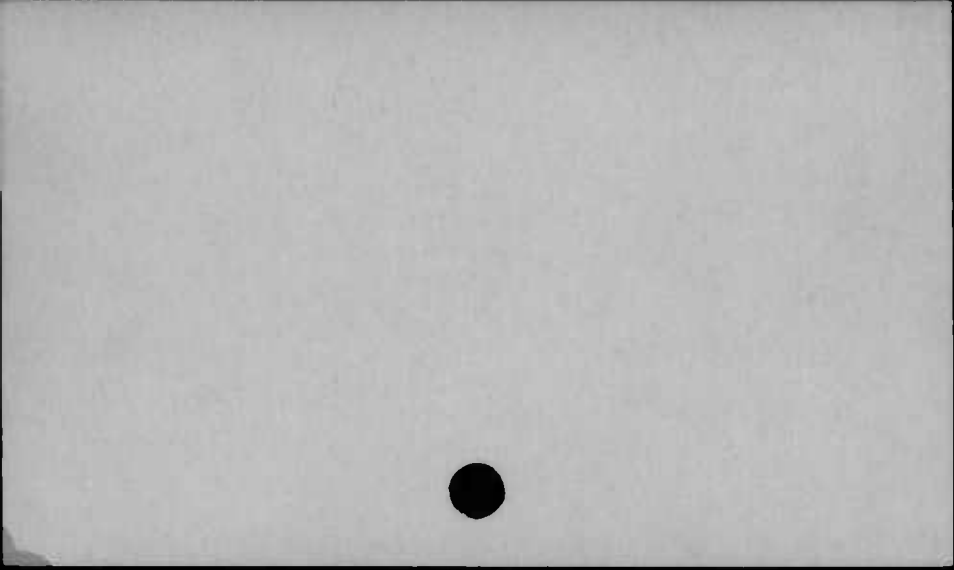
Address

Mutual



Calvert Co

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.





Name in Full

Died at

MARYLAND

Town

County

Month

Day

Y.

M.

D.

Native of

Occupation

Date 189

Age

~~Male~~

White

Married

~~Widow~~

Divorced

Female

~~Colored~~~~Single~~~~Widower~~

Number of children living 8

Husband

of

Wife

Father's

Mother's

Name

Name

Cause of

Primary

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Certificate of Death

26

Mrs Miranda Jones

Town

County

Died at near Dunkirk, Calverton County MARYLAND

Date 1898 Aug 30 Month Aug Day 30 Y. 4 M. 4 D. 4 Native of Calverton Co Occupation Housewife  
 Male White Married Widow Divorced Single Female Colored Widower Number of children living 7

Husband of Stro B Jones

Wife

Father's Name John Abbott Mother's Name Harrison

Cause of Death { Primary Carcinoma Uteri Immediate 25 How long sick Several years  
 Accident, Suicide, Homicide

Reported by

Address

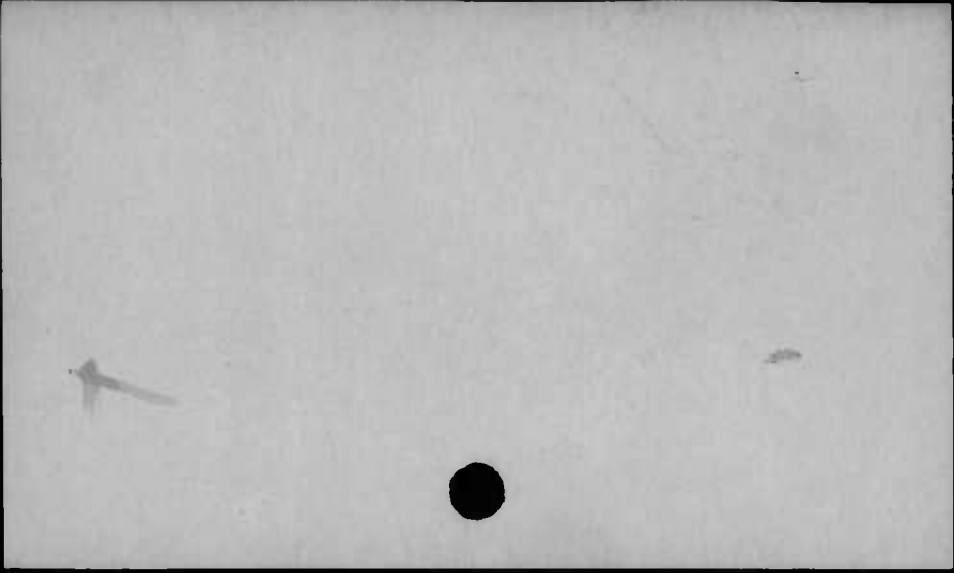
B. Bean

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 66968







Name in Full

Certificate of Death

Maggie Heint  
 Town Olivet County Calvert

12

Died at

MARYLAND

Date 1898 Month 8 Day 13 Age 1 Y. 5 M. D. Native of Calvert Occupation  
 Male White Married Widow Divorced  
 Female Colored Single Widower Number of children living

Husband  
 of  
 Wife

Father's Name H. W. Heint Mother's Name Mary A. Seimov

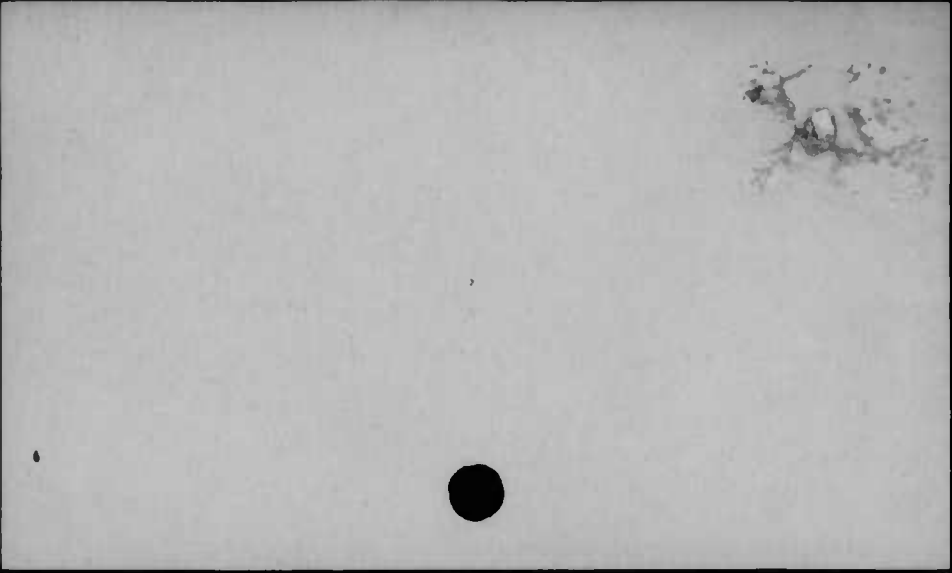
Cause of Death { Primary Unk. cause of De How long sick 2 1/2 months.  
 Immediate 165 Accident, Suicide, Homicide

Reported by Jas L. Guichon

Address Bertha P O Calvert Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968





Name in Full

Certificate of Death

8

John H. Plummer

Town

County

MARYLAND

Died at

Cemell

Calvert

Date 189

Month Day

Y. M. D.

Native of

Occupation

Aug 1<sup>st</sup>

Age 52. 10. 24

Maryland

Farmer

Male

White

Married

Widow

Divorced

~~Female~~~~Colored~~~~Single~~

Widower

Number of children living

5

Husband

of

Wife

Father's

Name

Robert Plummer

Mother's

Name

Mary J. Horan

Cause of

Primary

Lungs

Death

Immediate

Asthma

How long sick

8 to 10

~~Accident, Suicide, Homicide~~

Reported by

Mrs. H. Pembroke

In D

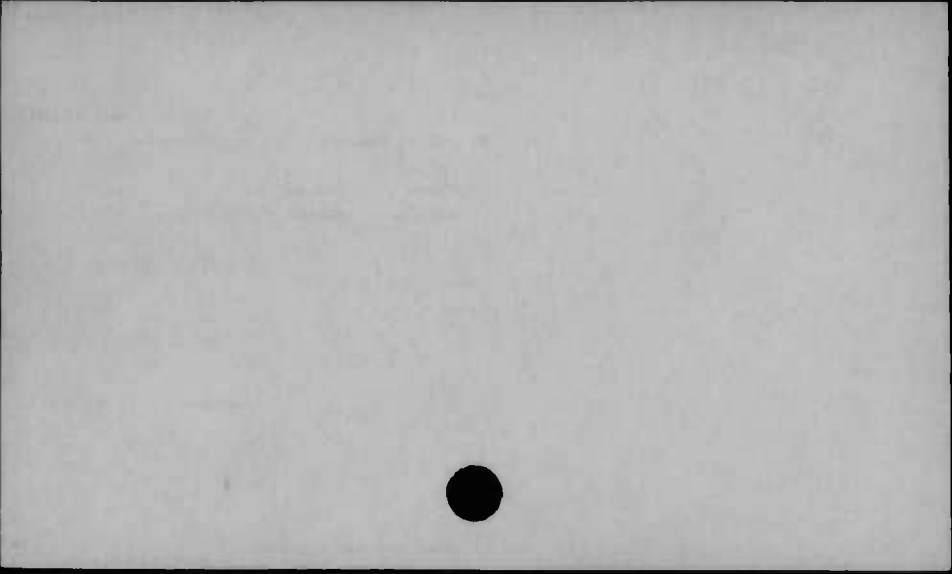
Address

Friendship

Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65060



Name in Full

Certificate of Death

Selma Wallace

14

Town

County

Green Run Calvert.

MARYLAND

Died at

Date 189

Month

Day

Y.

M.

D.

Native of

Occupation

8

8

14

Age

27-

Calvert

Teacher

~~Male~~~~White~~~~Married~~~~Widow~~~~Divorced~~

Female

Colored

Single

~~Widow~~

Number of children living

1

Husband  
of  
Wife

Father's

Mother's

Name

Name

Cause of

Primary

Tubercular Phthisis

How long sick

3 months

Death

Immediate

Laryngitis

Accident, Suicide, Homicide

Reported by

P. Briscoe

Address

mutual

Calvert Ct and

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY-BUREAU, 65908



Name in Full

Certificate of Death

Willet Melvin Weeks

16

Died at

Solomons

County

Calvert

MARYLAND

Date 189

8 Aug 20

Month Day

Age

Y. M. D.

3 28

Native of

Calvert

Occupation

Male

White

Married

Widow

Divorced

~~Female~~~~Colored~~~~Single~~~~Widower~~

Number of children living

Husband

of

Wife

Father's

Name

Willet Irvin Weeks

Mother's

Name

Sarah Elizabeth New

Cause of

Primary

Hooping cough

How long sick

11 days

Death

Immediate

Exhaustion

Accident, Suicide, Homicide

Reported by

John S. Borer

M.D.

Address

Bertie

Calvert

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 1906



Name in Full:

Certificate of Death

Luther McKinley Weems 9

Town

County

Died at

Dusby Calvert

MARYLAND

Date 1898

Month 8 Day 13

Y. 4 M. 18 D.

Native of

Occupation

Calvert

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband  
of  
WifeFather's  
Name

Peter Weems

Mother's

Name

Elizabeth V. Johnson

Cause of

Primary

Dysentery

How long sick

Several weeks

Death

Immediate

Accident, Suicide, Homicide

Reported by

Jos L. Tucker

Undertaker

Address

Bertha

Calvert Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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